

Enrollment Form

NC 401(k) PLAN

	NORTH CAROLINA 401(k) PLAN			NO 401(K) PLAN				
Instructions	Please print using blue or blac address or fax it to (570) 340-432	k ink. Please keep a copy for y 8. If faxing, please keep original	our records and send for your records.	completed form to the following Questions?				
	NC 401(k) Processing Center PO Box 5340 Scranton, PA 18505-5340			: Call (866) NCPLANS : for assistance.				
About You	Plan number Current employer name		Departme	Department name				
	[0,0,2,0,3]							
		(Please print entire employer na	ame) (Please p	(Please print entire department name)				
	Are you a Law Enforcement Office	er? ☐ Yes ☐ No						
	☐ Check here if you are enrolling in the Plan for the first time.							
	☐ Check here if you are a current member of the Plan and wish to enroll in GoalMaker or change your Investment Allocation and/or Contribution Information.							
	Social Security number	Daytime telepho	one number					
		area code						
	First name	MI Last name						
•	Address							
	City State ZIP code							
	Date of birth Sex Original date employed							
	month day year month day year							
Contribution Information	Please complete this section if you are enrolling in the Plan for the first time or wish to change your current contribution rate effective as soon as administratively feasible after September 22, 2003.							
mormation	l wish to contribute \$, OR, % (please fill in % from 1-80%, in whole percentages) of my salary per pay period.							
Investment	Fill out Part I or Part II. Do no	ot fill out both sections.						
Allocation (Please fill out Part I or Part II. Do not fill out both sections)	Part I Selection of model portfolio							
	By completion of Part I, you enroll in GoalMaker SM , Prudential Retirement's asset allocation program, and you direct Prudential Retirement to invest your contribution according to the GoalMaker SM model portfolio you select below. Enrollment in GoalMaker SM can be canceled at anytime by changing or exchanging your investment to a selection other than GoalMaker SM . Please read your Plan Highlights carefully before completing Part I.							
	Time Horizon (years until retirement)	GoalMaker SM M	GoalMaker SM Model Portfolio (check one box only)					
		Conservative	Moderate	Aggressive				
	0 to 5 Years 6 to 10 Years	∟ C01 ∟ C02	∟ M01 ∟ M02	∟ R01 ∟ R02				
	11 to 15 Years	□ C02	□ M02 □ M03	□ R02 □ R03				
	16 Plus Years	C04	M04	□ R04				

By enrolling in GoalMaker SM and selecting a GoalMaker SM model portfolio, you direct Prudential Retirement to automatically rebalance your account according to the model portfolio chosen on a quarterly basis. The rebalancing will occur on the second Friday of the month preceding the end of the quarter.

Please read your Plan Highlights for more information on rebalancing before completing Part I.

If you have completed Part I, do not complete this section.

Part II Design your own investment allocation

If you would like to design your own asset allocation <u>instead of</u> selecting a GoalMaker SM model portfolio under Part I, designate the percentage of your contribution to be invested in each of the available investment options. (Please use whole percentages. The total must equal 100%.)

I wish to allocate my contributions to the Plan as follows:

Percent Allocated	Codes	Investment Options
<u> </u>	NK	Prudential Stable Value Fund
<u> </u>	WJ	Fidelity Intermediate Bond Fund
<u> </u>	TU	Van Kampen Equity & Income
·	DV	Van Kampen Growth & Income
·	NL	Vanguard Equity Index Portfolio
	P2	Growth Fund of America
· · · · · · · · %	P0	Oppenheimer Main Street Small Cap
· · · · · · · %	P5	EuroPacific Growth Fund
· %	M7	Jennison Equity Opportunity Fund
_1,0,0,%	Total	

This form must be completed accurately and received by Prudential Retirement before Prudential Retirement receives contributions on your behalf. If a completed form is not received, Prudential will invest contributions in the Plan's default investment option, the Stable Value Fund. Upon receipt of your completed enrollment form, all future contributions will be allocated according to your investment selection. You must contact Prudential Retirement to transfer any existing funds from the Stable Value Fund used to invest your defaulted contributions.

Your Authorization

If you elect GoalMaker prior to the date that your NC 401(k) Plan transfers to Prudential Retirement (the "conversion date"), Prudential Retirement will implement your GoalMaker election with respect to future contributions at the time your first contribution is received by Prudential Retirement. Prudential Retirement will implement your GoalMaker election with respect to your account balance transferred from BB&T, and rebalance contributions received after conversion date, in accordance with GoalMaker on or about October 10, 2003. After Prudential Retirement invests your account balance pursuant to GoalMaker it will reinvest or rebalance your account balance periodically thereafter, in accordance with your Plan's scheduled rebalance dates. Prudential Retirement will not rebalance your account if you terminate your participation in GoalMaker by exchanging funds from one investment option to another or select an investment allocation other than GoalMaker for future contributions.

By signing below, you hereby confirm that you received, read and understand the information contained in the Retirement Planning Guide and, if you are currently a member of the NC 401(k) Plan, the NC 401(k) Transition Newsletters sent to you by the State of North Carolina during July 2003.

I direct my employer to make payroll deductions as I have indicated. I understand that upon enrollment, if my Plan allows, I will have telephone and/or internet privileges to perform transactions via Prudential's Interactive Voice Response service and Online Retirement Center.

I agree that neither Prudential Retirement, the trustees of the NC 401(k) Plan nor the State of North Carolina will be liable for any loss, liability, cost or expense for implementing instructions that I provide via the Internet or by telephone. I understand that Prudential Retirement will execute my instructions only when I simultaneously provide proper identification. This identification may consist of information that Prudential Retirement may reasonably deem necessary to establish my identity. I hereby authorize Prudential Retirement to make a tape recording of any conversation that I have with Prudential Retirement.

_X	 Date		
Participant's signature			